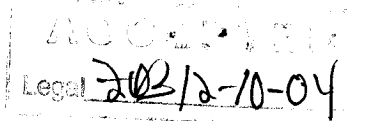


**PUBLIC SERVICE COMMISSION OF SOUTH CAROLINA**  
101 EXECUTIVE CENTER DRIVE  
COLUMBIA, SC 29210  
POST OFFICE DRAWER 11649  
COLUMBIA, SOUTH CAROLINA 29211



**CLASS C CHARTER** 2004-350-T DATE Dec. 2, 2004

**APPLICATION FOR CERTIFICATE OF PUBLIC CONVENIENCE AND  
NECESSITY FOR OPERATION OF MOTOR VEHICLE CARRIER**

Application is hereby made for a Certificate of Public Convenience and Necessity, in accordance with the provision of S.C. Code Ann., § 58-23-10, et seq. (1976), and amendments thereto.

1. Name under which business is to be conducted (corporation, partnership, or sole proprietorship, with or without trade name.)

Roscoe Swinton

2. (a) Street Address of Applicant 2517 Walker Swinton Rd.

Timmons ville, SC 29161

(b) Mailing address, if different from street address \_\_\_\_\_

(c) Telephone Number (843) 669-4014 SS N

3. If incorporated, a copy of Articles of Incorporation must be attached. (If incorporated outside of SC, need SC Secretary of State "Foreign Corporation" Certificate.)
4. (a) If a partnership, names and addresses of all persons having an interest in the business. (b) If a corporation, names and addresses of two principal officers will be sufficient.

**RECEIVED**  
DEC 09 2004  
**PSC SC**

5. The proposed service to be provided and the proposed rates and charges for such service, per Exhibit "C" included herewith.
6. The proposed list of equipment is as per Exhibit "D" included herewith.

7. Applicant is financially able to furnish the services as specified in this Application, and submits the following statement of assets and liabilities.

**ASSETS:**

Cash	2,500. <sup>00</sup>
Real Estates and Buildings	90,000. <sup>00</sup>
Accounts and Notes Receivable	10,000. <sup>00</sup>
Power Equipment (Net of Depreciation)	- 0 -
Garage & Office Equipment	- 0 -
(Net of Depreciation)	- 0 -
Other Assets	3,000. <sup>00</sup>
<b>TOTAL ASSETS</b>	<b>\$ 105,500.<sup>00</sup></b>

**LIABILITIES:**

Accounts and Notes Payable	- 0 -
Rents and Leases payable	- 0 -
Mortgages Payable	- 0 -
Debt on Power Equipment	- 0 -
Other Liabilities	1,600. <sup>00</sup>
<b>TOTAL LIABILITIES</b>	<b>\$ 1,600.<sup>00</sup></b>
<b>NET WORTH</b>	<b>\$ 103,900.<sup>00</sup></b>

10. Applicant is familiar with the provision of S.C. Code Ann., §58-23-10, et seq. (1976), and amendments thereto, and R.103-100 through R.103-241 of the Commission's Rules and Regulations for Motor Carriers (Vol.26, S.C. Code Ann., 1976), and R.38-400 through 38-503 of the Department of Public Safety's Rules and Regulations for Motor Carriers (Vol. 23A, S.C. Code Ann., 1976) and amendments thereto, and hereby promises compliance therewith.

STATE OF SOUTH CAROLINA,

COUNTY OF Florence

I, Roscoe Swinton

(Name of Applicant's Representative)

owner

(Title)

of \_\_\_\_\_, the Applicant for the Certificate of Public  
(Applicant)

Public Convenience and Necessity as set forth in the foregoing, swear or affirm that all statements contained in the above Application are true and correct.

**SWORN TO BEFORE ME**

At Florence S.C.

This the 7<sup>th</sup> day of Dec., 2004

James G. Hamkey  
(Notary Public) MSC

Roscoe Swinton  
(Signature of Applicant's Representative)

Commission Expires 1-15-08


## EXHIBIT D

**STATE OF SOUTH CAROLINA  
PUBLIC SERVICE COMMISSION**

## DESCRIPTION OF EQUIPMENT

[illegible]

\* Seats if passenger carrier or tonnage if freight carrier.

  
(Applicant)

Date: 12-7-04

(Applicant's Representative)

OVINEIR  
(Title)

EXHIBIT C

CLASS C – TAXI XX  
CHARTER     

THE SOUTH CAROLINA PUBLIC SERVICE COMMISSION  
Columbia, South Carolina

Applicant Roscoe Swinton

For the transportation of passengers as follows:

Area to be served: FLORENCE

Number of Passengers: 1 PASSENGER

Fares: ZONE 1 - 3.00 + 1.00 EACH ADDITIONAL PASSENGER

ZONE 2 – 3.75 + 1.00 EACH ADDITIONAL PASSENGER

ZONE 3 – 5.25 + 1.00 EACH ADDITIONAL PASSENGER

ZONE 4 – 7.00 + 1.00 EACH ADDITIONAL PASSENGER

CERTIFIED CORRECT

Date 12-7-04

Roscoe Swinton  
By

OWNER  
Title

**INSURANCE QUOTE**

The following insurance quote is for:

ROSCOE SWINTON

(Name of Motor Carrier)

2517 Walker Swinton Rd, Timmonsville SC 29161

(Address of Motor Carrier)

**Amount of Premium:**

Liability Insurance

\$ 2602.50

Cargo Insurance

The above quoted premiums are for a term of 12 months.

CANAL Insurance Company

(Insurance Company Name)

P.O. Box 7, Greenville SC 29602

(Home Office Address of Company)

is familiar with the Commission's Rules and Regulations relating to insurance requirements and the above quote meets the minimum insurance limits prescribed. The insurance company making this quote is authorized by the South Carolina Department of Insurance to do business in South Carolina.

12-03-04

Date

Geraldene B. Cunka

(Authorized Insurance Company Representative)